



Application Form to Create a Local Chapter

Name of Chapter: _____

President: _____

Address: _____

Phone: _____

eMail: _____

Vice President: _____

Address: _____

Phone: _____

eMail: _____

Secretary: _____

Address: _____

Phone: _____

eMail: _____

Treasurer: _____

Address: _____

Phone: _____

eMail: _____

Regular Annual Chapter Dues is \$30.00 per member. The Chapter shall send \$27.00 per member and retain \$3.00 for the Chapter.

Mail completed Membership Dues along with a list of all members, their mailing address, email, and phone number to

Cheryl Singley, 150 S. Silvery Lane, Dearborn MI 48124-1225
313.563.7656 mcgownguildtreasurer@gmail.com

For further information contact
Marty Liptak, 518.944.5179 mcgownguildcharimanofchapters@gmail.com